

M-SPIRIT REQUIRED ONLINE TRAINING

Training Completion Signature Form

DATE: _____ LOCAL AGENCY: _____

TRAINEE (please print): _____

TRAINING COORDINATOR/WIC DIRECTOR: _____

IMPORTANT NOTE: Prior to taking the M-SPIRIT REQUIRED ONLINE TRAINING, a User ID must be obtained by filling out the following forms and faxing them to the WIC State Office:

Computer Access Form: <http://www.dphhs.mt.gov/tsc/securityaccessforms.shtml>

M-SPIRIT Access Form: <http://wic.mt.gov/documents/documents/WICACCESFORM.pdf>

Upon completion of the M-SPIRIT REQUIRED ONLINE TRAINING, a signature is required below from both the TRAINEE and TRAINING COORDINATOR/WIC DIRECTOR to verify that the M-SPIRIT REQUIRED ONLINE TRAINING has been successfully completed. Once the State WIC Office receives this signed form, the TRAINEE will be granted access to the WIC M-SPIRIT system.

TRAINEE:

I, the TRAINEE listed above, have successfully completed the M-SPIRIT REQUIRED ONLINE TRAINING listed below:

Sessions 1- 6 and 8.

TRAINEE: _____ Date: _____

TRAINING COORDINATOR/WIC DIRECTOR:

I, the TRAINING COORDINATOR/WIC DIRECTOR listed above, verify that the TRAINEE listed above has successfully completed the M-SPIRIT REQUIRED ONLINE TRAINING.

TRAINING COORDINATOR/WIC DIRECTOR: _____ Date: _____

Upon completion, please FAX this form to the State WIC Office, (406) 444-0239